

Idaho Dual Eligible Programs

Provider Quick Reference

If you are a provider serving Medicare/Medicaid Dual Eligible Beneficiaries, you may serve beneficiaries that are enrolled in the Medicare Medicaid Coordinated Plan (MMCP) or Idaho Medicaid Plus (IMPlus) program.

The MMCP is a **voluntary** program and IMPlus is a **mandatory*** program for dual eligible beneficiaries that coordinates most of their Medicaid benefits through a private Health Plan. Dual Eligible beneficiaries are participants that receive both Medicare and Enhanced Medicaid and are over the age of 21. There are some groups of people who are excluded from mandatory enrollment including Tribal members, pregnant women, and individuals on the Adult Developmental Disabilities Waiver program. Availability of both programs is on a county-by-county basis. Eligibility is based on the participant's county of residence.

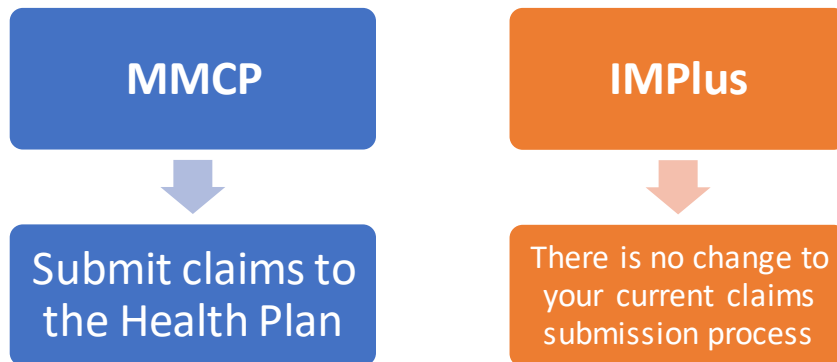
*Duals in counties identified as passive can 'opt out' of Idaho Medicaid Plus

How does this affect providers?

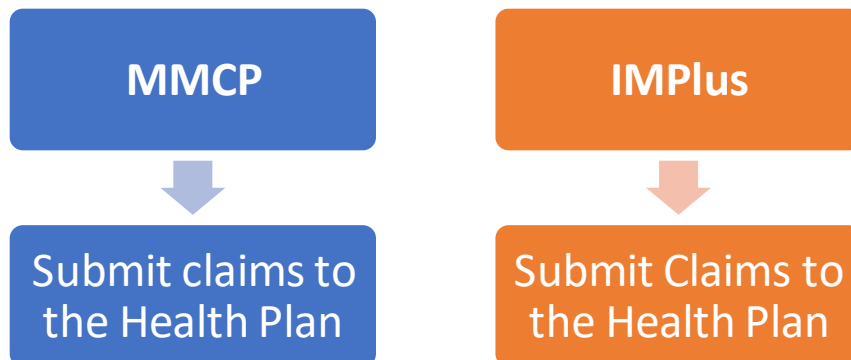
Depending on your provider type **and** the participants program, your claims may need to be submitted to a different entity.



If you're a **Provider that bills Medicare** (Primary Care Physician, Specialists, Pharmacy, etc.):



If you're a provider that bills **Medicaid** (Aged & Disabled Waiver, Behavioral Health, Skilled Nursing Facility, etc.):



If you're one of the following provider types, you are not affected at all:

- Developmental Disability Waiver Service providers
- Dental
- Non-Emergency Medical Transportation

Important Information



Location: IMPlus (mandatory Medicaid) is currently offered in the following counties: Ada, Bannock, Bingham, Boise, Bonner, Bonneville, Boundary, Canyon, Cassia, Elmore, Fremont, Gem, Jefferson, Kootenai, Madison, Minidoka, Nez Perce, Owyhee, Payette, Power and Twin Falls.

Passive counties: Adams, Benewah, Clark, Gooding, Jerome, Latah, Shoshone, Valley and Washington.



Eligibility Verification: All Duals in these counties must be enrolled in either the MMCP or IMPlus if they are not in an excluded population. There are three ways to verify if a member is on IMPlus or the MMCP:

1. **Ask the member.** The member will have an identification card issued by the Health Plan.
2. **Claims** submitted to Medicaid will be denied.
3. **Idaho Medicaid Provider Portal** will indicate the program and health plan the Dual member is enrolled with.

For detailed instructions on how to access and verify eligibility through Idaho Medicaid's Provider Portal, go to:

[https://www.idmedicaid.com/User%20Guides/Trading%20Partner%20Account%20\(TPA\)%20User%20Guide.pdf#page=39](https://www.idmedicaid.com/User%20Guides/Trading%20Partner%20Account%20(TPA)%20User%20Guide.pdf#page=39)



Change: Members on IMPlus in a mandatory county can only change their health plan one time per year during open enrollment after the initial 90-day coverage period. Members on the MMCP can only change their health plan one time per quarter due to limitations on Medicare plan changes.

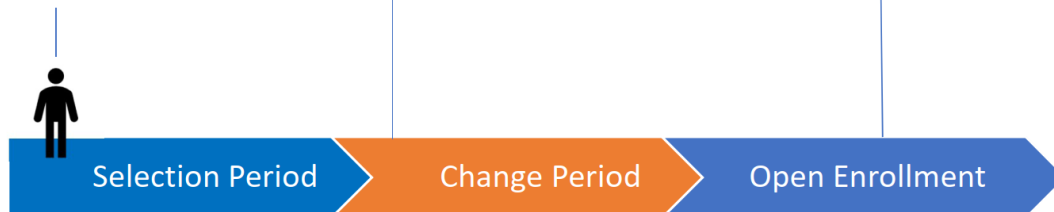
IMPlus Enrollment Timeline

Day 1-90 – Newly eligible

Members have 90 days to select an Idaho Medicaid Plus health plan with Blue Cross of Idaho or Molina Health Care of Idaho.

Day 91-180 – IMPlus coverage begins, members have 90 days to make a change to their enrollment.

Open Enrollment is October 15th- December 7th. Enrollment changes will go into effect January 1st.



Remember!

- Newly Eligible Duals may request to start their IMPlus program sooner than 90 days. If requested the effective date would be for the first of the come up month.

How does a provider know if a participant is enrolled in a program?

There are a few triggers that will alert you that a member you serve is a Dual enrolled in one of these programs.

Authorizations

1. If the participant has authorizations on file with Idaho Medicaid, you will receive a Notice of Decision (NOD) terminating all prospective authorizations. Authorizations related to carved out services such as Dental, Developmental Disability and Non-Emergency Medical Transportation will remain authorized with Idaho Medicaid.
2. The Health Plan will issue a NOD with the new authorization information.
3. Authorization requests and questions will be managed by the Health Plan.
4. Dual Eligible Providers with questions about authorizations for the Aged and Disabled Waiver, Personal Care Services, or Behavioral Health Services should contact the health plans by email:
 - Molina Healthcare of Idaho: MHIDPriorAuthorizations@MolinaHealthCare.Com
 - Blue Cross of Idaho: mmcp-mqm@bcidaho.com

Member Documents

1. The member will receive a new identification card from the health plan that is specific to the Duals program.
2. The member will receive a welcome packet containing benefit information.

Eligibility Verification

1. The member's Duals program and health plan will be available in the Medicaid Provider Portal (DXC Technologies) at www.idmedicaid.com. Use the TPA User Guide for instructions on how to check eligibility on the Medicaid Provider Portal. To get to the TPA User Guide, go onto the Medicaid Provider Portal, select **Provider > User Guides > Trading Partner Account (TPA) User Guide** (see page 37).
2. The assigned Health Plans provider portals also will have Dual members eligibility.

Once a member is enrolled with either Health Plan, their **Health Plan becomes the first point of contact for all questions or issues for both the member and the provider.**

Blue Cross of Idaho	Molina Healthcare of Idaho
MMCP - 888-495-2583	MMCP - 844-239-4913
IMPlus - 800-289-7921	IMPlus – 844-809-8445
https://medicare.bcidaho.com/plan-information/medicaid-medicare-overview.page	https://www.molinahealthcare.com/members/id/en-US/hp/Pages/home.aspx

If you need additional assistance after contacting the Health Plan, you can email IdahoDuals@dhw.idaho.gov or go to <http://mmcp.idaho.gov> for resource materials.



Contracting: All Aged and Disabled, Behavioral Health, and Skilled Nursing Facility providers that serve Dual Eligible Beneficiaries enrolled in one of these programs are required to contract with the Duals Health Plans to submit claims and receive payment for services rendered.

If you are not contracted with the Health Plans at the time a member enrolls into one of the Duals programs, the Health Plans are required to pay you as an out-of-network provider for ninety (90) days. During that time, they will work with you to get your contract in place.

Molina Healthcare of Idaho and Blue Cross of Idaho both have Provider Relations teams that are ready to assist you and answer your questions.

Molina Healthcare of Idaho	Blue Cross of Idaho
MMCP: 844-239-4914 IMPlus: 844-808-1383 Provider Service Representatives: Cody Hunemiller: 208-230-7876	MMCP and IMPlus: 208-286-3678 866-432-4612
MHIDProviderContracting@MolinaHealthCare.Com	prmedicaremedicaid@bcidaho.com

Providers should work directly with the Health Plans, however if you need additional help you can email IdahoDuals@dhw.idaho.gov.



Reimbursement Rates: Health plans are required to pay Medicaid rates for all services rendered to Dual members.

For Skilled Nursing Facilities: The health plans will only reimburse at the Medicaid established Interim Daily Rate for a Medicaid bed day. Neither the health plan nor IDHW will reprocess managed care bed day claims to account for the Medicaid - developed final daily rate.

Note: The Upper Payment Limit (UPL) calculation does account for both fee-for-service and Medicaid Managed Care bed days.

For Behavioral Health Providers: The Duals health plans will only reimburse at the Medicaid established rates. The Idaho Behavioral Health Plan may cover additional 'Value Add' services that are not covered under the Duals programs.

Note: There may be periods of time where rates paid under the Duals programs do not align with rates paid under the Idaho Behavioral Health Plan. The Duals health plans will configure new rates prospectively.

Note: Reimbursement rates listed on the Medicaid Fee-For-Service schedule are not applicable to providers enrolled with the Idaho Behavioral Health Plan.



Comparison: Remember that there are two programs for Idaho Duals, depending on where they live, and it is up to them to decide which program will meet their needs. Duals in the assigned counties must be enrolled in IMPlus or MMCP.

	MMCP	Idaho Medicaid Plus
Medicare Included	Yes	No
Mandatory Enrollment	No	Yes
Premium	No	No
Participant Choice	Yes	Yes*
Available Today	Yes	Ada, Bannock, Bingham, Boise, Bonner, Bonneville, Boundary,

		Canyon, Cassia, Elmore, Fremont, Gem, Jefferson, Kootenai, Madison, Minidoka, Nez Perce, Owyhee, Payette, Power and Twin Falls.
Care Coordination	Yes	Yes
Supplemental Benefits	Yes	No
Plan Choices	Blue Cross of Idaho <i>or</i> Molina Healthcare of Idaho	Blue Cross of Idaho <i>or</i> Molina Healthcare of Idaho

*Duals in counties identified as passive can 'opt out' of Idaho Medicaid Plus



Contact Us:

Visit our website: www.mmcp.dhw.idaho.gov

Email: IdahoDuals@dhw.idaho.gov

Call – 833-814-8568